

# MENTAL HEALTH SERVICES

Effective Date: 11-07-2020

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## I. PURPOSE

The purpose is to define and provide guidance as to what is allowable for the Mental Health Services category of service, in accordance with HRSA standards.

## II. DEFINITION

Funding of Mental Health Services that include psychological and psychiatric treatment and counseling services offered to individuals with a diagnosed mental illness, conducted in a group or individual setting, based on a detailed treatment plan, and provided by a mental health professional licensed or authorized within the State. providing such services, typically including psychiatrists, psychologists, and licensed clinical social workers.

## III. PROGRAM GUIDANCE

Mental Health Services are allowable only for PWH who are eligible to receive HRSA RWHAP services.

- Individuals served must have a documented mental diagnosis/diagnostic feature.
- Upon initial contact with client, agency will assess client for emergent/urgent or routine mental health needs.
- Providers confirm client's eligibility for services. The process to determine client eligibility must be completed in a timely manner so that screening is not delayed.

See also Psychosocial Support Services

## PERFORMANCE MEASURE

- Documentation of appropriate and valid licensure and certification of mental health professionals as required by the State
- Documentation of the existence of a detailed treatment plan for each eligible client that includes:
  - The diagnosed mental illness or condition
  - The treatment modality (group or individual)
  - Start date for mental health services
  - Recommended number of sessions
  - Date for reassessment and
  - Projected treatment end date
  - Any recommendations for follow up
  - The signature of the mental health professional rendering service,

Documentation of service provided to ensure that:

- Services provided are allowable under Ryan White guidelines and contract requirements
- Services provided are consistent with the treatment plan.
- Must provide access to mechanisms for urgent and emergency care when needed, such as in the case of a suicidal client.

NOTE: Treatment plan must be reflective of mental health diagnosis/diagnostic feature and severity of mental health symptoms as needed and serves as documentation for linking clients to other needed mental health services. (day programs, inpatient psychiatric units, community mental health programs and or other excluded services is clinically indicated)

See - Appendix A: HRSA/HAB National Monitoring Standards, and HRSA/HAB Core Performance Measures Portfolio and Core Measures links below. These sources provide supportive information for CQM program expectations for the recipient and provider subrecipients. HRSA HAB Core Performance Measures Portfolio: <https://hab.hrsa.gov/clinical-quality-management/performance-measure-portfolio>

HRSA HAB Core Performance Measures link: <https://hab.hrsa.gov/sites/default/files/hab/clinical-quality-management/coremeasures.pdf>

### **PROVIDER/SUBGRANTEE RESPONSIBILITY**

- Obtain and have on file and available for grantee review, appropriate and valid licensure and certification of mental health professionals
- Maintain client records that include:
  - o A detailed treatment plan for each eligible client that includes required components and signature
- Providers must maintain formal and informal collaboration/ linkages with mental health and substance abuse service organizations with in RWHAP Part B coverage area.

### **EXCEPTIONS AND EXCLUSIONS**

#### **Cannot include:**

- Complementary or alternative treatments including hypnotherapy and acupuncture.
- Inpatient medical services.
- Emergency room services
- Pharmacist consultations

**APPENDIX A: HIV/AIDS BUREAU, DIVISION OF STATE  
HIV/AIDS PROGRAMS NATIONAL MONITORING STANDARDS  
FOR RYAN WHITE PART B GRANTEES: PROGRAM – PART B**

**Quality Management**

National Monitoring Standards: Implement a Clinical Quality Management Program (CQM) to include: a) written QM plan; b) quality expectations for providers and services; c) method to report and track expected outcomes; d) monitoring of provider compliance with HHS treatment guidelines and Part B Program's approved Standards of Care.

Standard	Measure
1.1) Measure and report client health outcomes using Mental Health Services measures approved by ADPH	<p>1.1) Performance measurement data on the following indicators:</p> <ul style="list-style-type: none"> <li>• Percentage of persons living with HIV and receiving Mental Health Services, regardless of age, who have at least one medical visit in each six-month period of the 24-month measurement period with a minimum of 60 days between medical visits (Care marker defined as evidence of a HIV medical care visit date, a CD4 count and test date, a viral load value and test date, and/or an antiretroviral medication prescription and date).</li> <li>• Percentage of people enrolled in RW Part B-funded Program living with HIV and receiving Mental Health Services, regardless of age, who will have an HIV viral load less than 200 copies/mL at last HIV viral load test</li> </ul>

HRSA HAB National Monitoring Standards link: <https://hab.hrsa.gov/sites/default/files/hab/Global/programmonitoringpartb.pdf>